I OK MOTROCTIONS, SEE BACK OF FORM	IA ETUICA . SET	FORM STATEMENT
FOR INSTRUCTIONS, SEE BACK OF FORM CHECK ONE:	No. 7 A TELLS AND ST	DR-1 OF
☐ This is an initial* Statement of Organization	Reset Form	(Rev. 01/2006) ORGANIZATION
This is an amended* Statement of Organization *An initial Statement of Organization must be filed within 10 days of the con	SSAPR - 7. AM OF THE	Ear Office Use Oak
making expenditules, of incuffing indebteaness exceeding %/50 - Amendin	ente muet ha filad withiid 20 MJ E	Comm. # 9/96
d Clidinge. Penalties may be imposed for late-filed Statements of Omonizor	tion A condidate with an are	Indexed
committee that exceeds \$750 in activity for another office shall file within 10 DR-1 disclosing information concerning the campaign for the new office so	days either a new or amended ught.	Computer
COMMITTEE NAME (A candidate's committee must include the candidate's last name in the name of the committee.)		
		F 11
IMPUK I AN I: Indicate type of committee trou are reporting for 177		
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) Statewide PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Pallet Joseph (12) County PAC (9) City PAC (12) Local Pallet Joseph (13) County PAC (9) City PAC (13) Local Pallet Joseph (13) County PAC (14) Local Pallet Joseph (14) Local Pallet Joseph (15) County PAC (15)		
(5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue (Including committee involved in multiple city/county ballot Issues)		
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (manda	tory except for a candidate's committee)
REVIN BEDUVOIS	Name & Dave Som	
Mailing Address ↓ ↓ PO Box 931	Mailing Address ↓ ↓ U = 10	
ity, State   Sign Code   TA 5110 Z  Mailing Address   4518 4 Th Ave  City, State   Zip Code   TA 5110 Z  City, State   TA 5110 Z		
Phone (712) 223 - 1429		
e-Mail KJBFAUVAK C CARLEOUE, UET e-Mail JEVIS C SO MSKY, Nie †  INDICATE PURPOSE OF COMMITTEE - Check One Box Advocate for/against candidate(s) Advocate for ballot issue(s)  Comment or description:		
	ocate for/against candidate(s) Adv	/ocate for ballot issue(s) /ocate against ballot issue(s)
All Candidates Enter: Office Sought:	County/Local Candidates an	d Local Ballot Committees Enter:
Political Party (if applicable) Democraft	— county: WOODRU	1e4
	(If active in multiple ballot issue	elections, attach list of counties
District:	Date of Election:	
Year Standing for Election:  Bank Account Name	Candidate name & Address or Pa	
======================================	- Candidate name & Address or Pa	ront Entitu /DACo if applicable
lividhava Comaka Domack str	↓↓ Afi	fillate, or Sponsor
woodhury County Democratic	↓ ↓ Aff	fillate, or Sponsor
Name of Financial Institution/type of Account	↓↓ <u>Af</u>	fillate, or Sponsor
Name of Financial Institution/type of Account	↓↓ Aff  Mailing Address ↓ ↓	filiate, or Sponsor
Name of Financial Institution/type of Account  INDER BANK  Mailing Address O 1 1	Mailing Address ↓ ↓	filiate, or Sponsor
Name of Financial Institution/type of Account  INDER BANK  Mailing Address O 1 1	Mailing Address ↓ ↓	State   Zip   Zip   State
Name of Financial Institution/type of Account    Name of Financial Institution/type of Account	↑↓ Aff  Mailing Address ↓ ↓  City ↓ ↓	filiate, or Sponsor
Name of Financial Institution/type of Account  IN NEER BANK  Mailing Address  OI VIEW State J Zip J	Mailing Address ↓ ↓	filiate, or Sponsor
Name of Financial Institution/type of Account    Name of Financial Institution/type of Account	Mailing Address ↓ ↓  City ↓ ↓	filiate, or Sponsor
Name of Financial Institution/type of Account  IN NEER BANK  Mailing Address  TO I PLENCE ST  City State J Zip J J  NAME CITY JA 51101	Mailing Address    City    Phone ( )	filiate, or Sponsor
Name of Financial Institution/type of Account    Name of Financial Institution/type of Account	Mailing Address   City   Phone ( )	State   Zip   J
Name of Financial Institution/type of Account  IN NEER BANK  Mailing Address  TO I PLENCE ST  City State J Zip J J  NAME CITY JA 51101	Mailing Address   City   Phone ( )	State   Zip   J
Name of Financial Institution/type of Account    Name of Financial Institution/type of Account	Mailing Address   City   Phone ( )	State   Zip   chapters 68A and 68B and the administrative
Name of Financial Institution/type of Account    Name of Financial Institution/type of Account	Mailing Address   City   Phone ( )	State   Zip   chapters 68A and 68B and the administrative
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Name of Financial Institution/type of Account    Name of Financial Institution/type of Account	Mailing Address   City   Phone ( )   e-Mail   The property and that the failure to file these indidate's committee) to the automatic asset a placement of the words "paid for by" and shes to register a committee name for put in lieu of filing this form.  The receipt of corporate contributions by all of a permitted by lowa code sections 68A.30	State   Zip  chapters 68A and 68B and the administrative e reports on or before the required due dates essment of a civil penalty and the possible the name of the committee on all political rposes of using the shorter "paid for by" and committees except for statewide and local ballot 1 through 68A.303 and rule 351—4.25.
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